

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Law Enforcement Complex

Senate Sponsor: Bill Montford
 Date of Submission: <u>11/17/2017</u>

. Project/Program Description:

Construction of a Law Enforcement Complex

- 5. State Agency Contacted? No
  - a. If yes, which state agency?
  - b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Law Enforcement

#### 6. Amount of Non-recurring Requested for fiscal year 2018-19:

| Amount Requested for Operations | Amount Requested for | Total Amount of       |
|---------------------------------|----------------------|-----------------------|
|                                 | Fixed Capital Outlay | Requested State Funds |
|                                 | 1,714,500            | 1,714,500             |

#### 7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

| Туре   | Amount  | Percent |
|--|---------|---------|
| Federal                                      | 0       | 0.0%    |
| State (excluding the amount of this request) | 0       | 0.0%    |
| Local  | 222,885 | 11.5%   |
| Other  | 0       | 0.0%    |
| TOTAL  | 222,885 | 11.5 %  |

#### 8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 1,937,385

#### 9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.



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|   | Input Prior FY Appropriation for this project |                      |                          |  |
|---|---|----------------------|--------------------------|--|
| FY:   | for FY 2017-18                                |                      |                          |  |
| (If appropriated in FY 2017-18 enter the appropriated amount, |   |                      | mount, even if vetoed.)  |  |
| Column:   | Α   | В                    | С                        |  |
| Funds   | Prior Year                                    | Prior Year           | Total Funds Appropriated |  |
| Description:  | Recurring Funds *                             | Nonrecurring Funds * | (Column A + Column B)    |  |
| Input Amounts:  |   |                      |                          |  |

#### 10. Is future-year funding likely to be requested?

No

#### 11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?

Taylor County law enforcement and support staff to be consolidated in one facility. This is critical for the safety and well being of our law enforcement as well as being able to better serve the public.

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

<u>Construction of a Law Enforcement Complex to house all staff in one facility which will be adjacent to the County Jail.</u>

#### c. How will the funds be expended?

| Spending Category                                    | Description  | Amount  |
|--|--|---------|
| Administrative Costs                                 |  |         |
| ☐Executive Director/Project Head Salary and Benefits |  |         |
| □Other Salary and Benefits                           |  |         |
| □Expense/Equipment/Travel/Supplies/Other             |  |         |
| ☑Consultants/Contracted Services/Study               | Design, Surveying, and<br>Construction Engineering and<br>Inspection | 222,885 |
| Operational Costs                                    |  |         |
| □Salary and Benefits                                 |  |         |



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| □Expense/Equipment/Travel/Supplies/Other           |                          |           |
|--|--------------------------|-----------|
| ☐Consultants/Contracted Services/Study             |                          |           |
| Fixed Capital Construction/Major Renovation        |                          |           |
| ☑Construction/Renovation/Land/Planning Engineering | Construction of facility | 1,714,500 |
| TOTAL  |                          | 1,937,385 |

d. What are the direct services to be provided to citizens by the appropriations project?

<u>Consolidating all law enforcement and staff in one facility would allow for better communications between all staff which in turn would provide better service to the public.</u>

e. Who is the target population served by this project? How many individuals are expected to be served?

The entire population of the County as well as citizens who work in and visit the area.

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

To provide better service to our community with a central location for all law enforcement needs. Less time being spent traveling to different facility areas means more time spent providing services for our citizens needs. It also provides for a safer work place for our law enforcement.

- g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

  \_Taylor County will meet deliverables.
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

Taylor County Board of Commissioners

13. Requestor Contact Information:

a. Name: Melody Cox

**b.** Organization: Taylor County Board of Commissioners

**c. Email:** melody.cox@taylorcountygov.com

d. Phone Number: (850)838-3553

14. Recipient Contact Information:

a. Organization: Taylor County Board of Commissioners

**b. County:** Taylor

c. Organization Type:

O For Profit



### Local Funding Initiative Request - Fiscal Year 2018-2019

- O Non Profit 501(c) (3)
- O Non Profit 501(c) (4)
- Local Entity
- O University or College
- O Other (Please specify)
- d. Contact Name: Melody Cox
- e. E-mail Address: melody.cox@taylorcountygov.com
- f. Phone Number: (850)838-3553
- 15. If there is a registered lobbyist, fill out the lobbyist information below.
  - a. Name: Noneb. Firm: Nonec. Email:
  - d. Phone Number: